

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)

 PAGE 1 OF 1
 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) MOVE MARYLAND FORWARD		FEC IDENTIFICATION NUMBER ▼ C C00622431	
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee HEARST RADIO			Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 15 / 2016		
Mailing Address 3800 HOOPER AVE			Amount 6940.00		
City BALTIMORE	State MD	Zip Code 21211	Transaction ID : SE.4166		
Purpose of Expenditure RADIO ADS (10/15 - 10/31/2016)		Category/Type 004	Date of Disbursement or Obligation MM / DD / YYYY 10 / 12 / 2016		
Name of Federal Candidate SZELIGA, KATHY, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		
Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: MD			Calendar Year-To-Date Per Election for Office Sought 125762.00		
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General			2016 <input type="checkbox"/> Other (specify) ▶		

Full Name of Payee			Date of Public Distribution/Dissemination MM / DD / YYYY		
Mailing Address			Amount		
City	State	Zip Code	Date of Disbursement or Obligation MM / DD / YYYY		
Purpose of Expenditure		Category/Type			
Name of Federal Candidate			<input type="checkbox"/> Support <input type="checkbox"/> Oppose		
Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input type="checkbox"/> Senate State: _____			Calendar Year-To-Date Per Election for Office Sought		
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General			2016 <input type="checkbox"/> Other (specify) ▶		

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	6940.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	6940.00

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

MACKENZIE, SCOTT B, ,

[Electronically Filed]

Date

MM / DD / YYYY
10 / 15 / 2016

Signature